

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000067633

**Entity Name:** K & M APARTMENTS INC.

**Current Principal Place of Business:**

13393 MEMORIAL HIGHWAY  
NORTH MIAMI, FL 33161

**Current Mailing Address:**

13393 MEMORIAL HIGHWAY  
NORTH MIAMI, FL 33161

**FEI Number:** 26-0385675

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

E-CONSULTING INCORPORATED  
16300 NE 19TH AVENUE  
SUITE 215  
N MIAMI BEACH, FL 33162 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P/D  
Name HALL, KEITH  
Address 390 NW 153RD STREET  
City-State-Zip: BISCAYNE GARDENS FL 33169

Title VP/D  
Name HALL, MICHELLE  
Address 390 NW 153RD STREET  
City-State-Zip: BISCAYNE GARDENS FL 33169

Title T  
Name HALL, MICHELLE  
Address 390 NW 153RD STREET  
City-State-Zip: BISCAYNE GARDENS FL 33169

Title S  
Name HALL, MICHELLE  
Address 390 NW 153RD STREET  
City-State-Zip: BISCAYNE GARDENS FL 33169

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** KEITH HALL

**PRESIDENT**

**04/21/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date